For Office Us	e Only: A	I#
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Signature of Authorized Officer

Print Name

## Application for Approval to Construct, Install, or Alter Stage II Vapor Recovery Controls for Transfer of Service Station Fuels at Individual Facilities

Louisiana Department of Environmental Quality Engineering Group 1/Technology Division P.O. Box 4314 Baton Rouge, LA 70821-4314 Instructions: Type or Print carefully in ink (Illegible applications will be returned). Complete both pages of the application. For assistance, call (225) 219-3600. Stage II Equipment Owner Mailing Address City \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_ Gasoline Dispensing Facility Information Full Legal Business Name Facility Location Facility Operator \_\_\_\_\_ Telephone No. \_\_\_\_\_ Federal Tax ID # \_\_\_\_\_ Facility's Local Name \_\_\_\_ Contractor/Installer Information Telephone No. The information supplied on this application VEM-20 is true and correct to the best of my knowledge.

If application is for the construction of a new Stage II facility, enclose a **nonrefundable** \$132 application approval fee as required by LAC 33:III.223. Return application to the address at the top of this page. This form is to be used for Stage II Vapor Recovery Only.

Date

Title

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## Stage II Vapor Recovery Application Page 2 List the type of Stage II Vapor Recovery equipment that will be installed at this location and California Ex. Order #: Attach piping diagram, the proposed construction schedule, and testing plans pursuant to LAC 33:III.2132.B.6. (Attach blueprint, no hand drawings accepted. The piping diagram should include specifications determined in the Executive Order including but not limited to: pipe diameters, slope, location of vent risers and flow direction. Any application that does not include the above information will be denied.) FOR DEPARTMENT USE ONLY – DO NOT WRITE BELOW THIS LINE Application for approval to construct, install, or alter the above indicated Stage II vapor recovery system \_\_\_\_\_ Approved \_\_\_\_\_ Denied is: \_\_\_\_\_No Certified Controls \_\_\_\_\_ Application is Illegible \_\_\_\_\_No Piping Diagram Provided \_\_\_\_\_ No Signature Reason for Denial: No Fee/Incorrect Fee Provided \_\_\_\_\_ Other (explained below) Comments: AI# \_\_\_\_\_ Date: \_\_\_\_\_ Reviewed by: \_\_\_\_\_ If application is approved, you will receive a Certificate to Operate at a later date. The Certificate to

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Operate must be kept on location at the facility.